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Division of Corporations
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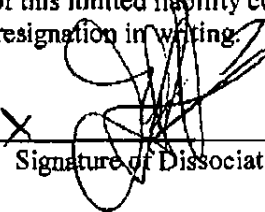


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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FLORIDA
2. The Florida document/registration number assigned to this limited liability company is:
L16000185063
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/12/2016
4. I, LUIS M DIAZ, hereby withdraw/resign as a
(Print Name of Person Resigning)
AMBR
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


X _____
Signature of Dissociating Member or Resigning ManagerFiling Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)FILED
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